|   |   |   |               |   |                      |                                |                   | Application or Docket Number |                        |        |                               |                        |  |  |
|---|---|---|---------------|---|----------------------|--------------------------------|-------------------|------------------------------|------------------------|--------|-------------------------------|------------------------|--|--|
| PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2000  |   |   |               |   |                      |                                |                   |                              | 09/764911              |        |                               |                        |  |  |
| CLAIMS AS FILED - PART I  |   |   |               |   |                      |                                |                   |                              |                        |        |                               |                        |  |  |
| (Column 1) (Column 2)   |   |   |               |   |                      |                                | SMALL ENTITY TYPE |                              |                        | OR     | OTHER THAN<br>OR SMALL ENTITY |                        |  |  |
| TC  | TAL CLAIMS  |   |               |   |                      |                                | RAT               | Έ                            | FEE                    | 1      | RATE                          | FEE                    |  |  |
| FOR   |   |   | NUMBER FILED  |   | NUMBER EXTRA         |                                | BASIC             | BASIC FEE 355.00             |                        | OR     | BASIC FEE                     | 710.00                 |  |  |
| TOTAL CHARGEABLE CLAIMS   |   |   | 13 minus 20=  |   | •                    |                                | X\$ 9=            |                              | OR                     | X\$18= |                               |                        |  |  |
| INE   | EPENDENT CL   | AIMS  | / mi          | nus 3 =                                 | *                    |                                | X40               | X40=                         |                        | OR     | X80=                          |                        |  |  |
| MU  | ILTIPLE DEPEN   | IDENT CLAIM PI                              | RESENT        |   |                      |                                | +13               | <br>5=                       |                        | OR     | +270=                         |                        |  |  |
| * If the diff rence in column 1 is less than zero, enter "0" in column 2  |   |   |               |   |                      | TOT                            |                   |                              | OR                     | TOTAL  | 7,3                           |                        |  |  |
| CLAIMS AS AMENDED - PART II   |   |   |               |   |                      |                                |                   |                              | ,                      | 3      | OTHER                         | THAN                   |  |  |
|   | <u>a</u>  | (Column 1)                                  | 12 (c 20 c 20 | (Column 2) (Column 3)                   |                      |                                | SMALL ENTITY      |                              | OR                     | SMALL  | ENTITY                        |                        |  |  |
| AMENDMENT A   |   | REMAINING<br>AFTER<br>AMENDMENT             |               | NUM<br>PREVIO<br>PAID                   | BER<br>OUSLY         | PRESENT<br>EXTRA               | RAT               | Έ                            | ADDI-<br>TIONAL<br>FEE |        | RATE                          | ADDI-<br>TIONAL<br>FEE |  |  |
|   | Total   | · 13  | Minus         | 5                                       | <b>&gt;</b> O        | =                              | X\$ 9             | }=                           |                        | OR     | X\$18=                        |                        |  |  |
|   | Independent   |   | Minus         | ***                                     | 3                    |                                | X40               | =                            |                        | OR     | X80=                          |                        |  |  |
|   | FIRST PRESE   | NTATION OF MU                               | JETIPLE DEF   | ENDEN                                   | CLAIM                |                                | +135              | ;=                           |                        | OR     | +270=                         |                        |  |  |
|   |   |   |               |   |                      |                                | TO                | TAL                          |                        |        | TOTAL                         |                        |  |  |
|   |   | ADDIT.                                      | EE            |   | J                    | ADDIT. FEE                     |                   |                              |                        |        |                               |                        |  |  |
| AMENDMENT B   |   | (Column 1) CLAIMS REMAINING AFTER AMENDMENT |               | (Colur<br>HIGH<br>NUM<br>PREVIC<br>PAID | IEST<br>BER<br>DUSLY | (Column 3)<br>PRESENT<br>EXTRA | RAT               | E                            | ADDI-<br>TIONAL        | 1      | RATE                          | ADDI-<br>TIONAL        |  |  |
|   | Total   | · 12  | Minus         |   | <u> </u>             | =                              | X\$ 9             | _                            | FEE                    | OR     | X\$18=                        | FEE                    |  |  |
|   | Independent   | . 1   | Minus         | ••• ;                                   | ≃<br>२               | =                              | X40               | -                            |                        |        | X80=                          |                        |  |  |
| 4   | FIRST PRESE   | NTATION OF MU                               | JLTIPLE DEP   | ENDENT                                  | CLAIM                |                                |                   |                              |                        | OR     |                               | $\overline{}$          |  |  |
|   |   |   |               |   |                      | (                              | +135              | TAL                          |                        | OR     | +270=<br>TOTAL                | 1                      |  |  |
| (Column 1) (Column 2) (Column 3)  |   |   |               |   |                      |                                |                   | 1                            |                        | OR ,   | ADDIT. FEE                    |                        |  |  |
| <del></del>   |   |   |               |   |                      |                                |                   |                              |                        |        |                               |                        |  |  |
| AMENDMENT C   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |               | HIGH<br>NUM<br>PREVIO<br>PAID           | BER<br>OUSLY         | PRESENT<br>EXTRA               | RAT               | Ε                            | ADDI-<br>TIONAL<br>FEE |        | RATE                          | ADDI-<br>TIONAL<br>FEE |  |  |
|   | Total   | •   | Minus         | ••                                      |                      | =                              | X\$ 9             | <u> </u>                     |                        | OR     | X\$18=                        |                        |  |  |
|   | Independent   | •   | Minus         | ***                                     |                      | =                              | X40               |                              |                        | 00     | X80=                          |                        |  |  |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                                      |   |               |   |                      |                                |                   | _                            |                        | OR     |                               |                        |  |  |
|   | * If the entry in column 1 is less than the entry in column 2 write *0* in column 3 |   |               |   |                      |                                |                   |                              |                        | OR     | +270=                         |                        |  |  |
| "If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |   |               |   |                      |                                |                   |                              |                        |        |                               |                        |  |  |